

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

10/518562

1 Date of Request: _____ 2 Serial/Patent # _____

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/>	Filing	1	12/20/04	\$ 100
<input type="checkbox"/>	Amendment			\$
<input type="checkbox"/>	Extension of Time			\$
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input type="checkbox"/>	Petition			\$
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$

7 TOTAL AMOUNT OF REFUND \$ 100

8 TO BE REFUNDED BY:

10. REASON:

☒ Overpayment

☐ Duplicate Payment

☐ No Fee Due (Explanation): _____

☒ Treasury Check

☐ Credit Deposit A/C #: _____

9 03 -- 2412

11 REFUND REQUESTED BY: _____

TYPED/PRINTED NAME: A Johnson TITLE: paralegal

SIGNATURE: A Johnson PHONE: 308-9640

OFFICE: PCT

***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****

APPROVED: _____ DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: